

Alabama Board of Massage Therapy

610 South McDonough Street

Montgomery, AL 36104

334.269.9990

334.263.6115

almtbd@aol.com

Application for Registration as a Massage Therapy School Instructor

Instructions

1. Complete application and attach a cashier's check or money order in the amount of \$10.00 (One-Time Fee)
2. Attach a copy of your current Alabama Massage Therapy License Certificate
3. Attach a notarized letter documenting two years of current massage therapy experience
4. Please refer to Section 34-43-20(5), Code of Alabama, 1975, to familiarize yourself with the requirements for registration as a massage therapy school instructor.

Name: _____

Mailing _____

Address: _____

City, St, and _____

Zip: _____

Telephone Number: _____

Social Security Number: _____

Name of Primary School: _____

(Where you will be instructing)

How long have you been an instructor at the above school: _____

Alabama License # _____

Original Issue Date: _____ Expiration Date: _____

I, _____, do certify that I am the person referred to on the application and that the statements contained herein are true and correct. I understand that it is my responsibility to operate as a massage therapy instructor according to the statutes regarding massage therapy and the Rules and Regulations of this Board.

Signature: _____

Date: _____

Subscribed and sworn to before me this _____ day of

_____, 20____.

Notary Signature: _____

Commission Expiration: _____

(SEAL)